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Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	

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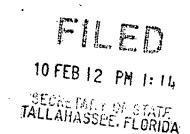
COVER LETTER

Department of State New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT:	am TSI Inc.		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	a check for:
_	J		
\$70.00	\$78.75	\$78.75	□ \$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
	& Certificate of Status	& Certified Copy	Certified Copy
		•	& Certificate of Status
		ADDITIONAL CO	
ADDITIONAL COPY REQU			of I REQUIRED
FROM: Cra	aia Finlay		
FROM: OR	Nam	e (Printed or typed)	
		• • • • • • • • • • • • • • • • • • • •	
170	1 kennedy Point Suite 1009		
		Address	
Ovi	edo, Florida 32765		
	City	, State & Zip	
40=	100 1010		
407	-493-1842	Telephone number	
	Daytime	cicphone number	
cfin!	ay@team-tsi.com		
		d for future annual report	notification)

NOTE: Please provide the original and one copy of the articles.

AFFIDAVIT



STATE OF FLORIDA COUNTY OF Servingle.

COMES NOW Affiant, Craig R. Finlay, and after being duly sworn, states as follows:

- 1. That Affiant is over the age of twenty-one (21), and Affiant has personal knowledge of the contents of this Affidavit.
- 2. That Affiant is the sole manager and owner of all of the membership interests in TEAM TSI, LLC, a Florida limited liability company, further identified as Document Number L02000029244 and Employer Identification Number 550814417.
- 3. Affiant, as the sole manager and owner of TEAM TSI, LLC, hereby consents to and approves the use of the name TEAM TSI for the corporation to be formed under the name TEAM TSI, INC. pursuant to the Articles of Incorporation attached hereto as Exhibit "A" and incorporated herein by reference.
- 4. That the Florida Department of State may rely on this Affidavit and the consent and approval stated herein in permitting the use of the Name TEAM TSI, INC. pursuant to the Articles of Incorporation attached hereto as Exhibit "A".

FURTHER AFFIANT SAYETH NOT.

I declare under penalties of perjury under the laws of the State of Florida that

foregoing is true and correct.

Signed:

Craig R. Finlay

Sworn and subscribed to before me, a Notary Public, this 9th day of YESROLE 1 2010, by Craig R. Finlay, who was personally known to me or produced 700

as identification and who ⊠did or □ did not take an oath.

JEFFREY A. SMITH

Notary Public - State of Florida

My Commission Expires Jul 6, 2010

Commission # DD 571712

Bonded By National Notary Assn.

Aary Signature

Print Name: JETTEL 4 SMETH

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) ARTICLE I NAME 10 FEB 12 PM 1: 14 The name of the corporation shall be: Team TSI Inc. ARTICLE II PRINCIPAL OFFICE The principal street address and mailing address, if different is: 1701 hennedy Point Stute 1009 Ovied 1FLY 32765 ARTICLE III PURPOSE The purpose for which the corporation is organized is: Any and all lawful business. ARTICLE IV SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): Craiq Finlay, CEO lakes Circle 32766 ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: raia tinlau lakes Circle Spreu ruliota, FL 32766 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Craua Finlau Osprey Lakes Circle Chuliota, PL 327610 Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity nature/Regis